

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	1/17
FORMALITY REVIEW	44	932	02-05-01
RESPONSE FORMALITY REVIEW	A.M.	5C 520	05-16-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6/27/01
2	12/6/01
3	5/16/03
4	2/16/05
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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